DOCUMENT RESUME

ED 172 918 PS 010 659

AUTHOR Koch, Diane A.; And Others
TITLE Parental Defense Style and Child Competence: A Match-Mismatch Hypothesis.
SPONS AGENCY National Inst. of Mental Health (DHEW), Rockville, Md.
PUB DATE Mar 79
GRANT NIMH-MH-22836
NOTE 18p.; Paper presented at the Biennial Meeting of the Society for Research in Child Development (San Francisco, California, March 15-18, 1979)

EDRS PRICE MF01/PC01 Plus Postage.
DESCRIPTORS Children; *Cognitive Development; *Complexity Level; Institutionalized Persons; *Interpersonal Competence; *Mental Illness; *Parent Child Relationship; Parent Influence; Parents; Peer Evaluation; Personality Assessment; Psychiatric Hospitals; Psychological Studies; Research; Research Utilization; *Social Adjustment
IDENTIFIERS *Defense Mechanisms

ABSTRACT

This study sought to explore the possible relationship between parental style of psychological defense and children's social competence in 50 families in which one parent had been hospitalized for a psychiatric disorder. The children sampled were nine 4-year-olds, eleven 7-year-olds and thirty 10-year-olds. Based upon a formal analysis of the logical transformations inherent in various defense mechanisms, three levels of complexity of defenses were identified, along with a counterpart set of cognitive operations necessary for decoding these defense levels. It was hypothesized that children lacking the requisite cognitive skills to grasp the logical complexities of their disturbed parent's primary mode of psychological defense would be less socially adjusted and judged less competent than children who can understand the defensive transformations of their parent. The results indicated that children who, due to their cognitive immaturity, cannot decipher their parent's defensive strategies are rated by peers and fathers as less competent than children who can understand their parent's defenses. Furthermore, children with a parent who employs defense mechanisms slightly too complex for them to comprehend are significantly more socially incompetent than children whose cognitive structures are largely mismatched with or are far too immature to understand the complexity of their parent's defenses. Implications of these results for psychotherapeutic interventions with children and families are discussed. (Author/BH)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

ED172914

U.S. DEPARTMENT OF HEALTH,
EDUCATION & WELFARE
NATIONAL INSTITUTE OF
EDUCATION

THIS DOCUMENT HAS BEEN REPRODUCED EXACTLY AS RECEIVED FROM THE PERSON OR ORGANIZATION ORIGINATING IT. POINTS OF VIEW OR OPINIONS STATED DO NOT NECESSARILY REPRESENT OFFICIAL NATIONAL INSTITUTE OF EDUCATION POSITION OR POLICY

PARENTAL DEFENSE STYLE AND CHILD COMPETENCE: A MATCH-MISMATCH HYPOTHESIS[1]

Diane A. Koch
(University of Rochester)

David W. Harder, Ph.D.
(University of Rochester)

Michael J. Chandler, Ph.D.
(University of British Columbia)

Katherine F. Paget, Ph.D.
(Tufts University)

"PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY

Diane A. Koch

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."

PS 010659

[1]This research was supported by NIMH Program Project Grant MH22836. The investigators in the project are Lyman C. Wynne (Principal Investigator), Alfred Baldwin, Clara Baldwin, Michael Chandler, Robert Cole, Lawrence Fisher, Norman Garmezy, Robert Geertsma, Deborah Greenwald, David Harder, Howard Iker, James Jones, Robert Klein, Ronald Kokes, Stephen Munson, Barry Ritzler, John Romano, Leonard Salzman, Margaret Singer, and John Strauss. Investigators previously participating are Rue Cromwell, Elaine Faunce, James Heriot, Fredric Jones, Gerald Rabenstein, and Lawrence Space.

The authors wish to thank Michael Davidson and John Simonson for their statistical consultation. Thanks are also due to Alfred Baldwin who offered helpful comments and revisions.

Requests for reprints should be sent to Diane A. Koch, William P. Carter Center, University of Maryland Hospital, Baltimore, Md. 21201

ABSTRACT

This study sought to explore the possible relationship between parental style of psychological defense and children's social competence in 50 families in which one parent had been hospitalized for a psychiatric disorder. Based upon a formal analysis of the logical transformations inherent in various defense mechanisms, three levels of complexity of defenses were identified, along with a counterpart set of cognitive operations necessary for decoding these defense levels. It was hypothesized that children lacking the requisite cognitive skills to grasp the logical complexities of their disturbed parent's primary mode of psychological defense would be less socially adjusted and judged less competent than children who can understand the defensive transformations of their parent. The results indicated that children who, due to their cognitive immaturity, cannot decipher their parent's defensive strategies are rated by peers and fathers as less competent than children who can understand their parent's defenses. Furthermore, children with a parent who employs defense mechanisms slightly too complex for them to comprehend are significantly more socially incompetent than children whose cognitive structures are largely mismatched with or are far too immature to understand the complexity of their parent's defenses. Implications of these results for psychotherapeutic interventions with children and families are discussed.

The purpose of this research was to explore the possible relationship between parental style of psychological defense and social competence in children of various cognitive maturities. A number of researchers (Schaefer 1959 Bandura & Walters 1959, Becker, Peterson, Luria, Shoemaker & Hellmer 1962) have found evidence that various kinds of parental environments differentially influence the social and cognitive development of children. Baumrind (1967) reported that socially outgoing, independent children tend to come from homes in which parents can be described as loving and authoritative. A relationship between parental disciplinary techniques and children's development along various moral dimensions has been reported by Hoffman (1970). Witkin (1969) has found support for a relationship between parental attitudes and development of cognitive style in children. The present study can be placed within this domain of research, which seeks to define important dimensions of parenting behavior and explore their impact upon children's development. Here, efforts are directed at individually important psychological phenomena of the parents, namely defense mechanisms, which can heavily influence interaction with their children and hence the children's psychological well-being.

Chandler, Paget & Koch (1978) have analyzed mechanisms of psychological defense according to their logical complexity and provide a structural model of defense mechanisms, ordering defenses along a continuum of increasing structural complexity. Their research has shown that children's success or failure in interpreting and understanding various mechanisms of defense in others is related to their developing cognitive ability to resolve the increasingly complex forms of negation, characterizing defenses. This relationship between children's level of cognitive-developmental maturity and their ability to understand various mechanisms of defense is conceived as having potential relevence to the cross-generational transfer of psychopathology

(Harder, Kokes, Fisher & Strauss, Note 1). According to this view, the response of children to the operation of psychological defense in others, their parents in particular, is selectively dependent upon both the level of logical complexity inherent in the particular defensive strategy used by the parent and the level of cognitive maturity which characterizes the child exposed to the defense. One factor which might be expected to contribute to the high risk for future psychopathology among children of a disturbed parent is the habitual and excessive use of a psychological defense which mystifies children because it is structurally beyond their cognitive decoding powers.

It was hypothesized that children whose parent employs a particular defensive maneuver too logically complex to be understood by them should evidence a greater incidence of social disturbance and thus be at greater risk for present and future psychopathology (Cowen, Pederson, Babigian, Izzo & Trost, 1973) than children whose parent presents a defensive style which is more understandable, given the children's level of cognitive development.

METHOD

Subjects

The subjects in this study were 50 families, selected from a total of 145 families who participated in the University of Rochester Child and Family Study (Garmezy, 1978). This is an ongoing, longitudinal, high-risk project, investigating patterns of development in male children, aged 4, 7 and 10, of families in which one parent has been hospitalized for a psychiatric disorder. In each family, a diverse set of variables is studied which reflect familial, parental and child functioning. The families included in the present study were

those on whom three kinds of information were available: first, information concerning the child's level of cognitive maturity; second, a personality assessment of the hospitalized parent; and third, measures of social competence of the child.

In the present study, nine 4 year olds, eleven 7 year olds, and thirty 10 year olds comprised the children sampled. Eleven of the 50 previously hospitalized parents were males and 39 were females. Using a five-fold diagnostic schema described elsewhere in detail (Fisher, Note 2), nine parents were categorized at the most recent hospitalization within a narrow and clearly defined spectrum of schizophrenia, four were within a broadly defined spectrum of schizophrenia, eight were affective psychotics (unipolar and bipolar), two were "intermediate" (psychotic but not clearly schizophrenic or affective psychotic), and 27 fell in a non-psychotic group, comprised primarily of neurotic depressives and personality disorders. The most recent psychiatric hospitalization occurred an average of 4.36 years prior to the study. All patients were required to have been out of the hospital at least 3 months before entry into the study.

All families were Caucasian and from lower-middle to upper-middle class socioeconomic status levels. Average patient and child I.Q.'s were 113.5 and 110.6, respectively.

Assessment Procedures

Cognitive maturity was evaluated by means of Form A of the Goldschmid-Bentler Concept Assessment Kit-Conservation (Goldschmid & Bentler, 1968). Those children who demonstrated conservation ability by getting a perfect score of 12 were assigned to the concrete operational group. Children who obtained a score of 9, 10 or 11 were assigned a transitional status and those

who received a score below nine were assigned to the preoperational group.

Three measures of social competence based upon parental reports were obtained on all children. These included the Rochester Adaptive Behavior Inventory (Jones, 1977), which produces an overall evaluation of the child's general adaptation and clinical symptomatology, and the Missouri Children's Behavior Check-List (Sines, Parker, Sines & Owen, 1969), scored separately for mother and father reports. Two additional measures were available on 40 of the children going to school (7 and 10 year olds). One was a mean teacher rating scale of school behavioral dimensions relevant to social competence and the other a mean peer rating scale of school behaviors (Fisher, Note 3).

Assessment of parental defensive style was made with Minnesota Multiphasic Personality Inventory scales developed through item analyses by Haan (1965). The MMPI protocol for each of the previously hospitalized parents was scored according to the scales reflecting the five defense mechanisms of repression, denial, displacement, intellectualization and projection. These defense mechanisms were categorized by means of the Chandler, Paget & Koch (1978) structural model in terms of their logical complexity. Repression and denial represent defenses at the first level of the model and imply negation through simple inversions. Displacement and intellectualization are Level 2 defenses, involving negation through the application of reciprocal operations. Projection is a Level 3 defense employing features of both inverse and reciprocal operations

In order to derive a primary mode of defense for each "patient" parent, parents were categorized according to the highest level of defense complexity they employ significantly. Raw scores on Haan's scales were converted to z-scores and the significant use of a particular defense was defined by obtaining a z-score greater than +.68. Thus, parents who obtained z-scores greater than +.68 on denial (Level 1) and on intellectualization (Level 2) were

categorized as Level 2 parents, while those who scored significantly on denial (Level 1) and on projection (Level 3) were assigned to the Level 3 group. Parents who did not score significantly high on any of the five defense mechanisms were grouped in a no-primary defense category.

Parental defensive style/child cognitive maturity combinations were scored as "Matched" or "Mismatched." Matched combinations were those in which the major defensive style exhibited by the parent is logically resolvable for the child's level of cognitive development. Mismatched combinations were those in which the parent presents a defensive style too logically complex for the child to untangle cognitively. Previous research (Chandler, Paget & Koch, 1978) has indicated that Level 1 defenses can be understood by transitional and concrete operational, but not preoperational children. Level 2 defenses require a minimum of concrete operational ability and cannot be understood by preoperational or transitional children. While, Level 3 defenses require formal operations and cannot be understood by preoperational, transitional or concrete operational children. Thus, all significantly defensive parents (at Levels 1, 2 & 3) with preoperational children were scored as Mismatched. Level 1 parents with transitional and concrete operational children were Matched. Of the Level 2 parents, those with concrete operational children were Matched but, those with preoperational and transitional children were Mismatched. In view of the fact that none of the children in the sample were formal operational, all parents of defense Level 3 and their children were scored as Mismatched.

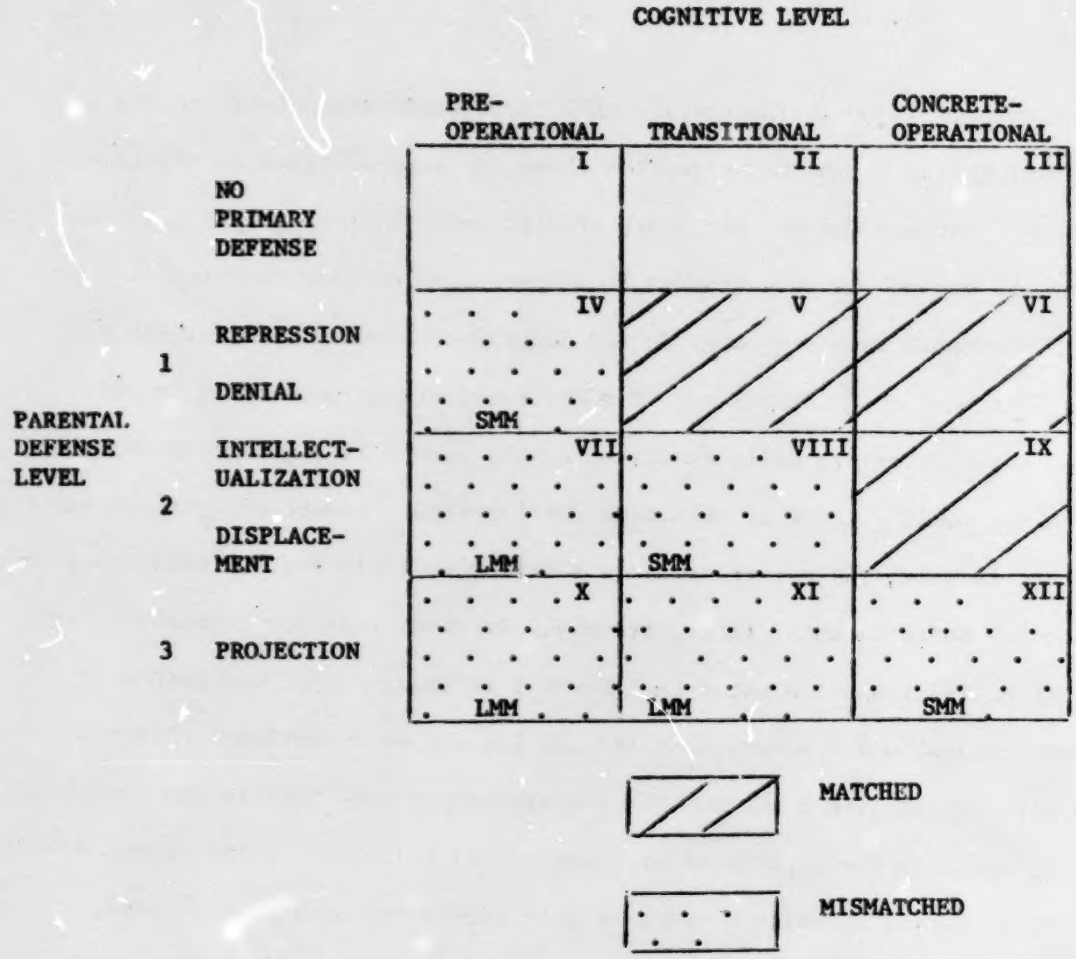

Figure 1. Cognitive Level and Parental Defense Level Experimental Design

A second scoring procedure was employed post hoc which subdivided the Mismatched group of parent-child combinations into Small-Mismatch (SMM) and Large-Mismatch (LMM) groups. The Small-Mismatch group was comprised of combinations which were slightly incongruent, in which the child's cognitive ability enables him/her to approach understanding, although, not fully resolve his/her parent's defensive style. This group consisted of Level 1 parents/ preoperational children, Level 2 parents/transitional children and Level 3

parents/concrete operational children. Families in the Large-Mismatch group were those in which the parental style defensive for exceeded the child's cognitive decoding powers, i.e., Level 2 parents/preoperational children, Level 3 parents/preoperational children, and Level 3 parents/transitional children.

RESULTS

All child competence measures were normally distributed, except for the mother's report on the Missouri Children's Behavior Check -List. These ratings were submitted to a logarithmic transformation, in order to eliminate a negatively skewed distribution. A two-factor analysis of variance between groups experimental design with cognitive ability (3 levels) and defense complexity (4 levels) was employed. Since data collection was performed by a number of investigators with aims different from those of the immediate project at hand, the present analysis was constrained to use a matrix in which subjects were distributed unequally, resulting in some very small cell n's. Therefore, nonparametric statistical procedures were utilized.

Particular planned comparisons were tested using the Mann-Whitney U statistic. In order to test the hypothesis that the children of mismatched parent-child groups are less competent than children of matched groups, cells IV, VII, VIII, X, XII were contrasted with cells V, VI, IX (See Figure 1). The results showed significant differences in competence between children of these groups on peer ratings, $U(18,18) = 104$, $p < .05$, one-tailed, and on Missouri Children's Behavior Check-List (father ratings), $U(18,24) = 139.5$, $p < .02$, one tailed. Results using the other three measures were in the predicted direction but did not reach significance.

Table 1

Mean Ratings of Social Competence
For Parent/Child Groupings

Social Competence Measure	Matched Group	Mismatched Group	Small Mismatch (SMM)	Large Mismatch(LMM
Rochester Adaptive Behavior Inventory (range = 4-1)	2.39	2.63	2.63	2.63
Missouri Children's Behavior Check-List				
Father's Report (range = 67-8)	31.94	39.42	43.33	32.25
Mother's Report (range = 63-3)	30.61	36.83	39.06	32.38
Fisher's Teacher Ratings (range = 27-65)	50.84	47.57	43.74	52.13
Fisher's Peer Ratings (range = 23-78)	53.35	46.62	40.15	51.73

No main effects for cognitive ability or defense complexity were anticipated or found. Similarly, no significant differences in child competence were found when the parent group with no primary defense was contrasted with the defensive parent groups (Levels 1, 2 & 3). This result may have been due to an aggregate of defensiveness of parents in this group equal to that of other groups despite the absence of any particularly significant defense or it may have been due to the presence of some significant defense other than those five assessed for the study. In any case, these results are consistent with the present view that type of parental defense alone, when divorced from interactions with child cognitive competence, are not predictive of child outcome. As predicted then, children whose parent's primary mode of defense is too logically complex for them to understand are less competent

in the home and school situations than those children whose parent's mode of defense is comprehensible to them.

Although not anticipated, post-hoc analyses indicated that children in the Large-Mismatch group were more competent than children in the Small-Mismatch group (cells IV, VII, XII vs. VII, X, XI), yet, less competent than children in the Matched group, as measured by peer and father ratings, $U(18,16) = 78$, $p < .05$, one-tailed; $U(18,16) = 73$, $p < .01$, one-tailed, respectively.

Interestingly, results were replicated using a parametric weighted analysis of variance method (Davidson & Toporek, 1977) for the Matched-Mismatched comparison, $F(1,33) = 5.41$, $p < .02$ for peer ratings. The other Matched-Mismatched and Small-Mismatch - Large-Mismatch comparisons approached but did not reach significance.

DISCUSSION

The results of this study provide support for the hypothesized relationship between children's ability to decode parental mechanisms of psychological defense to which they are habitually exposed and their social competence. Children whose cognitive operations do not include the ability to process the inverse and/or reciprocal transformations inherent in the psychological defense mechanisms used by their parents are unable to make sense out of their parent's defensive communications and thus, are apparently adversely affected by their parent's psychopathology. This study presents further evidence to indicate that children are expecially vulnerable when their parent's primary mode of defense represents a slight mismatch with their cognitive decoding powers. This finding is consistent with research carried out by Kagan (1970). He has presented evidence for a curvilinear relationship between attention time and the novelty of a stimulus event. Moderately novel events are attended to

longer than very familiar or completely novel ones. It may be interpreted that the small-mismatch group in the present study is characterized by a family environment which presents moderately novel events to children or problems of sufficient difficulty to capture their attention and engage children in attempts to understand communications or behaviors which are on their face confusing and disjointed. However, due to the developmental immaturity of these children, they are incapable of fully decoding the defensive environment and thus, remain mystified and frustrated in their attempts. This group of children stands in contrast to children whose parents present defensive structures which greatly exceed their cognitive resolving abilities. These children are in some ways insulated from the effect of their parent's pathologies, at least for the present time. Since they cannot even approach an understanding of these defenses, they may not actively attend to their parent's mystifying behaviors.

These findings are seen as having possible implications for psychotherapeutic interventions with families and children. A useful addition to the methods employed by the clinician to gain an understanding of family interactions may be the assessment of the degree of match between the parent's defensive structure and the child's cognitive maturity. Attempts to help very young children understand their parent's very complicated defenses may be futile and the prognosis for therapeutic success poor, unless significant changes can be made in the degree of defensiveness shown by the parent. However, children are continuously developing greater cognitive abilities and will probably be able to cope with their familial environment more adequately at a later point. Thus, an important time for intervention, particularly in terms of facilitating some protective psychological insulation in children from their parents' mystifying behaviors, may be when they have

developed to the point where they are attempting to resolve the complexities of a disordered or pathogenic parent's communications. This is the time when children should best be able to make use of a professional's assistance in unravelling the defensive negations with which they are presented.

This study points to what might seem at first glance, to be a paradox. The logically most complex defense examined here, projection, is generally understood to be the most primitive in the sense of its earlier developmental use and its pathognomonic significance (Vaillant 1971, Kernberg 1976). Conversely, the logically simpler defenses of Levels 1 and 2 are seen by clinicians as more advanced psychologically. It is important to realize that the logical complexity of a defense and its relative psychological maturity may well be entirely independent concepts. In fact, it could be the case that the logical complexity involved in projection actually contributes to its pathognomonic, and possibly pathogenic, importance.

The generality of these findings is limited, however, since three of the five competence measures analyzed did not evidence any significant effects. Replication of the study on a more representative and expanded sample is indicated. Unfortunately, the present study employed a preponderance of concrete operational children at the expense of the less developmentally mature and also failed to include a group of formal operational children. In addition, most of the previously hospitalized parents studied in this sample were mothers. Thus, replication using a sample of disturbed parents more equally distributed according to sex is also recommended. Since the never-hospitalized fathers were generally in better psychological health, their ratings of their children's competence can be seen as more veridical then the mothers', which may explain why effects were found using father ratings and not mothers'.

Despite these qualifications, the present results indicate a clear relationship between the comprehensibility of parental defensive style and and social competence in children both within and outside the family. Children of high-risk families exposed to pronounced defenses of their parent's too complex for them to decode are less socially adjusted and are presumably at greater risk for later psychopathology than children who are able to understand their parent's mechanisms of psychological defense.

Reference Notes

1. Harder, D.W., Kokes, R.F., Fisher, L. & Strauss, J.S. Child competence and psychiatric risk: IV. Relationships of parent diagnostic classifications and parent psychopathology severity to child functioning. Manuscript submitted for publication, 1979.

2. Fisher, L. Child competence and psychiatric risk: III. Comparisons based on diagnosis of hospitalized parent. Manuscript submitted for publication, 1979.

3. Fisher, L. Child competence and psychiatric risk: I. Model and method. Manuscript submitted for publication, 1979.

References

Bandura, A. & Walters, R.H. Adolescent aggression: A study of the influence of child-training practices and family interrelationships. New York: Ronald, 1959.

Baumrind, D. Child care practices anteceding three patterns of preschool behavior. Genetic Psychology Monographs, 1967, 75(1), 43-88.

Becker, W.C., Peterson, D.R., Luria, Z., Shoemaker, D.J. & Hellmer, L.A. Relations of factors derived from parent-interview ratings to behavior problems of five-year olds. Child Development, 1962, 33(3), 509-535.

Chandler, M.J., Paget, K.F. & Koch, D.A. The child's demystification of psychological defense mechanisms: A structural and developmental analysis. Developmental Psychology, 1978, 14, 3, 197-205.

Coven, E.L., Pederson, A., Babigian, H., Izzo, L.D. & Trost, M.A. Long-term follow-up of early detected vulnerable children. Journal of Consulting and Clinical Psychology, 1973, 41, 438-446.

Davidson, M.L. & Toporek, J. ANOVA with general cell weights. Proceedings of the Statistical Computing Section, American Statistical Association, 1977, 174-179.

Garmezy, N. Current status of a sample of other high-risk research programs. in L.C. Wynne, R.L. Cromwell & S. Matthysse (eds.). The nature of schizophrenia: New approaches to research and treatment. New York: Wiley & Sons, 1978, pp. 473-474.

Goldschmid, M.L.T. & Bentler, P.M. Concept assessment kit-conservation. San Diego, Calif.: Educational Testing Service, 1968.

Haan, N. Coping and defense mechanisms related to personality inventories. Journal of Consulting Psychology, 1965, 29(4), 373-378.

Hays, N. Statistics for the social sciences. New York: Holt, Rinehart & Winston, 1973.

Hoffman, M.L. Moral development. In P. Mussen (ed.). Carmichael's Manual of Child Psychology. vol. 2, third ed. pp. 261-359.

Jones, F. H. The Rochester Adaptive Behavior Inventory: A parallel series of instruments for assessing social competence during early and middle childhood and adolescence. In J.S. Strauss, H.M. Babigian & M. Roff (eds.). The origins and course of psychopathology. N.Y., Plenum Press, 1977.

Kagan, J. The determinants of attention in the infant. American Scientist, 1970, 58, 298-306.

Kernberg, O.F. Object relations theory and clinical psychoanalysis. New York: Aronson, 1976.

Schaefer, E.S. Acircumplex model for maternal behavior. Journal of Abnormal and Social Psychology, 1959, 59, 226-235.

Siegel, S. Nonparametric statistics for the social sciences. New York: McGraw-Hill, 1956.

Sines, J.O., Pauker, J.D., Sines, L.K. & Owen, D.R. Identification of clinically relevant dimensions of children's behavior. Journal of Consulting and Clinical Psychology, 1969, 33, 728-734.

Witkin, H.A. Social Influences in the development of cognitive style. In D.A. Goslin (ed.). Handbook of socialization theory and research. Chicago: Rand McNally, 1969, 687-706.

Vaillant, G.E. Theoretical hierarchy of adaptive ego mechanisms: A 30-year follow-up of men selected for psychological health. Archives of General Psychiatry, 1971, 24, 107-118.